

MONTAUK ARTISTS' ASSOCIATION, INC. ANNUAL DUES _____

MEMBERSHIP \$35 FAMILY MEMBERSHIP \$50
CONTRIBUTING MEMBERSHIP \$100* FRIEND of the ASSOCIATION \$250*
SPONSOR of the ASSOCIATION \$500* BENEFACTOR of the ASSOCIATION \$1000*

*TAX DEDUCTABLE TO THE FULL EXTENT OF THE LAW

NAME _____ Amount enclosed \$ _____

Mailing Address (summer) _____

(winter) _____

Telephone(s) (S) _____ (W) _____

cell _____ e-mail _____

web-site _____



THE MONTAUK ARTISTS' ASSOCIATION, INC.

I would like to be active in these committees:

Depot Gallery _____ Education _____ I wish to teach _____

Show on the Green _____ Commemorative Journal _____ Member Tent _____

Percy's Scholarship Fund _____ Newsletter / Bulletin Board _____

WE ACCEPT M/C, VISA, DISCOVER AND AMEX # _____ exp ____/____

If you are using VISA, please include your security code _____